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FACSIMILE COVER SHEET

August 23, 2005

Total Number of Pages
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EXAMINER: Huy D. Nguyen

Business Phone 571-272-9950.

Telecopier Phone: (571) 273-8300

From: Adrian J. Lee/Samantha A. Holys

Comments: Please see attached.

Docket No.: 15689.88

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PATENT APPLICATION
Docket No. 15689.88

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of)
)
	Takchiro Ikeda et al.)
)
Serial No.:	10/054,734) Art Unit
) 2681
Filed:	November 13, 2001)
)
Conf. No.:	3537)
)
For:	MOBILE COMMUNICATION SYSTEM AND)
	DISTRIBUTED BROADCAST INFORMATION)
	CONTROL METHOD IN MOBILE)
	COMMUNICATION SYSTEM)
)
)
Examiner:	Huy D. Nguyen)
)
Customer No.:	022913)

AMENDMENT "C"


Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office action of June 24, 2005 (paper no. 06132005), please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 15689.88	
Applicant(s): IKEDA et, al.						
Application No. 10/054,734	Filing Date November 13, 2001	Examiner Huy D. Nguyen	Customer No. 022913	Group Art Unit 2681	Confirmation No. 3537	
Invention: MOBILE COMMUNICATION SYSTEM AND DISTRIBUTED BROADCAST INFORMATION CONTROL METHOD IN MOBILE COMMUNICATION SYSTEM						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	9 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 23-3178 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: August 23, 2005			
ADRIAN J. LEE Attorney for Applicant Reg. No. 42,785 Customer No. 022913 Transmitted by facsimile to USPTO at (571) 273-8300			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
cc:						

